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CONFIRMATION NO. 5027

<b>SERIAL NUMBER</b> 10/823,432	<b>FILING OR 371(c) DATE</b> 04/13/2004 <b>RULE</b>	<b>CLASS</b> 800	<b>GROUP ART UNIT</b> 1633	<b>ATTORNEY DOCKET NO.</b> PC18327A
<b>APPLICANTS</b> Scott Phillip Baron, Ann Arbor, MI; Debra Lynn Hidayetoglu, West Bloomfield, MI; James David Offord, Dexter, MI; Ti-Zhi Su, Ann Arbor, MI;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/462,634 04/14/2003 and claims benefit of 60/518,110 11/07/2003				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/23/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input type="checkbox"/> Allowance		<b>STATE OR COUNTRY</b> MI	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 40
Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		<b>INDEPENDENT CLAIMS</b> 8		
<b>ADDRESS</b> 28880				
<b>TITLE</b> Animals and cells containing a mutated alpha2delta gene				
<b>FILING FEE RECEIVED</b> 1690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	